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CONFIRMATION NO. 8661

<b>SERIAL NUMBER</b> 10/540,917	<b>FILING OR 371(c) DATE</b> 07/21/2005 <b>RULE</b>	<b>CLASS</b> 033	<b>GROUP ART UNIT</b> 2859	<b>ATTORNEY DOCKET NO.</b> 05087
<b>APPLICANTS</b> Massimo Bergamasco, Calci, ITALY; Fabio Salsedo, Latina, ITALY; Guenther Nino Ullrich, Massa, ITALY; Paolo Vilella, Pisa, ITALY;				
<b>** CONTINUING DATA *****</b> This application is a 371 of PCT/IB02/05666 12/30/2002				
<b>** FOREIGN APPLICATIONS *****</b> NONE				
<b>** SMALL ENTITY **</b>				
Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no 35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after met Verified and Acknowledged <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after met		<b>STATE OR COUNTRY</b> ITALY	<b>SHEETS DRAWING</b> 6	<b>TOTAL CLAIMS</b> 13
Examiner's Signature <i>[Signature]</i> Initials		<b>INDEPENDENT CLAIMS</b> 1		
<b>ADDRESS</b> 23338				
<b>TITLE</b> Device for goniometric measurements				
<b>FILING FEE RECEIVED</b> 515	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit	